



PAYMENT DUE  
PLEASE REMIT TO:  
**CITY OF DAYTON**  
PO BOX 643700  
CINCINNATI, OH 45264-3700

(FILL IN YEAR) **CITY OF DAYTON**  
**INDIVIDUAL**  
**INCOME TAX RETURN**

90% of Estimated Tax Liability due by December 15

TAXPAYER NAME, ADDRESS & ACCOUNT NUMBER

Is this Dayton Tax Return: ☐ Single ☐ Joint Filing

TAX ID # OR SS # \_\_\_\_\_

TAX ID # OR SS # \_\_\_\_\_

Your phone # \_\_\_\_\_

Your Email address \_\_\_\_\_

**May we contact you by secured email?** ☐ Yes ☐ No

Are you a Dayton resident? ☐ Yes ☐ No

Did you file a Dayton Return last year? ☐ Yes ☐ No

Did you file on a different Tax ID# last year? ☐ Yes ☐ No  
If so, please list Tax ID# \_\_\_\_\_

Did You Move during this tax year? ☐ Yes ☐ No

Old address \_\_\_\_\_

Date Moved in \_\_\_\_\_ or Date Moved Out \_\_\_\_\_

If you moved more than once during the year, attach  
list to tax return showing addresses and dates

All supporting W-2's and Federal Schedules must be submitted with this return

**Please Complete Work Sheet On Reverse Side Before Completing Section A**

**SECTION A TOTAL TAXABLE INCOME**

1. Wages, Salaries, Tips, and Other Employee Compensation-Use highest wage figure on W-2.  
See Section A on back of return. (Part year residents must pro-rate their income based on  
time lived in Dayton.) ..... \$ \_\_\_\_\_
2. Other Taxable Income or Deductions from Reverse Side..... \$ \_\_\_\_\_
3. Taxable Income (Add Lines 1 through 2)..... \$ \_\_\_\_\_
4. **Dayton Tax Due @ 2.25% of Line 3** ..... \$ \_\_\_\_\_
5. Payments and Credits:
  - A. Dayton Tax Withheld ..... \$ \_\_\_\_\_
  - B. Other City Tax Withheld ..... \$ \_\_\_\_\_
  - C. Estimated Taxes Paid/Prior Year Credit ..... \$ \_\_\_\_\_
  - D. Other Credits /Partnership Payments..... \$ \_\_\_\_\_
6. Total Payments and Credits (Add Lines 5A through 5D) ..... \$ \_\_\_\_\_
7. **Balance of Tax Due (Line 4 minus Line 6)** ..... \$ \_\_\_\_\_
8. Penalty \$ \_\_\_\_\_ Interest \$ \_\_\_\_\_ Total Penalty/Interest \$ \_\_\_\_\_
9. **Amount Due: Make Checks Payable to City of Dayton**..... \$ \_\_\_\_\_
10. If Overpayment: Credit to Estimated Taxes \$ \_\_\_\_\_ or Refund \$ \_\_\_\_\_  
If your refund is \$10.00 or less, no refund will be issued. If you owe \$10.00 or less, no payment is necessary.

OFFICE USE ONLY

**SECTION B DECLARATION OF ESTIMATED TAX FOR TAX YEAR** \_\_\_\_\_

11. Estimated Income Subject To Tax \$ \_\_\_\_\_ @ 2.5% = ..... \$ \_\_\_\_\_
12. Estimated Tax Withheld By Your Employer(s) ..... \$ \_\_\_\_\_
13. Total Estimated Tax Due (Line 11 minus Line 12) ..... \$ \_\_\_\_\_
14. Credit From Prior Tax Year..... \$ \_\_\_\_\_
15. Net Estimated Tax Due (Line 13 minus Line 14) ..... \$ \_\_\_\_\_
16. Estimated Tax Amount Due is 22.5% of Line 15 (First Payment)..... \$ \_\_\_\_\_
17. **TOTAL AMOUNT DUE (Line 9 plus Line 16) AMOUNT ENCLOSED:** ..... \$ \_\_\_\_\_

**SECTION C CREDIT CARD PAYMENTS**

To help keep your information secure, credit card payments will be accepted only by telephone 24 hours a day by calling (937) 333-3500. Select "Option 2" to connect to the tax system, and then press "Option 1" to make a payment. To speak to a customer service representative during normal business hours, select "Option 2" and then "Option 0".

READ BEFORE SIGNING: The undersigned declare this return and attached schedules to be a true and complete return for the taxable year stated and that the figures used herein are the same as used for Federal Tax purposes, adjusted to the requirements of the Dayton city tax ordinances represented by this return. I understand that if I am under withheld in the following tax year (by \$200.00 or 10% of tax due) I will be charged an underpayment penalty if I fail to make required estimated tax payments. If this return was prepared by a tax professional, may we contact them directly? ☐ Yes ☐ No

**X**

Tax Preparer Signature

Taxpayer Signature

Date

Tax Preparer Phone #

Spouse Signature

Date

FORM R-I

(Rev 9/2016)

PLEASE ATTACH CHECK AND WAGE STATEMENTS (W-2'S) HERE

**SECTION D RETIRED AND TAXPAYERS WITH NO TAXABLE INCOME CHECK APPROPRIATE EXPLANATION(S)**

- ☐ Retired with No Taxable Income  
☐ All Tax Withheld @ 2.25% By My Employer  
☐ Lived and Worked Outside Of Dayton  
☐ Active Duty Military  
☐ Business or Rental Sold on \_\_\_\_\_ to \_\_\_\_\_ or Closed on \_\_\_\_\_  
☐ I certify that I had NO Schedules E, C, K1, 2106, 4797, or 1099-MISC. income or losses reported on my Federal Tax Return.

**SECTION A TOTAL W-2 WAGES**

Employer's Name	Work Address	Dayton tax	Other City Tax	Total Taxable Wages*
Total Taxable Wages*				

\*Total Taxable Wages: Box 5 is usually, but not always, the highest gross wage. Use the largest amount from boxes 1, 3, 5, or 18, of your W-2 tax forms. **Please provide a written explanation if Box 5 is not the highest wage figure.**

**SECTION E OTHER INCOME OR LOSS AND FORM 2106 EXPENSE**

List all income as reported to the IRS on each of the following attached Schedules or Forms. Copies of the Federal Income Tax Return and/or various applicable Federal Schedules are required to be included with your tax return.

	Profit and/or Loss		Profit and/or Loss		Profit and/or Loss
Schedule C		Form 4797		Schedule K-1	
Schedule C		Form 1099-MISC		Schedule K-1	
Schedule E		Form 1099-MISC		Other	
Schedule E		Form 1099-MISC		Other	
Total to Line 2		Total to Line 2		Total to Line 2	

**Please note losses are not deductible against W-2 wages.**

Form 2106 Expenses: \_\_\_\_\_ Total to Line 2. **Form 2106 expenses are deductible from wages, subject to 2% of adjusted gross income. IRS Schedule A is required to be attached to this return for supporting documentation.**

**SCHEDULE Y ALLOCATION OF PROFITS**

	a. Located Everywhere	b. Located in Dayton	c. Percentage (b ÷ a)
1. Original Cost of Real and Tangible Personal Property .....	_____	_____	_____ %
Gross Annual Rentals Paid Multiplied by 8 .....	_____	_____	_____ %
Total Step 1 .....	_____	_____	_____ %
2. Gross Receipts from Sales Made and/or Work or Services Performed .....	_____	_____	_____ %
3. Wages, Salaries and Other Compensation Paid .....	_____	_____	_____ %
4. Total Percentages .....	_____	_____	_____ %
5. Average Percentage (Total Percentages/Number of Percentages Used) .....	_____	_____	_____ %

Additional addresses or comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**IMPORTANT INFORMATION: MAIL RETURN WITH:**

**PAYMENT DUE TO:** City of Dayton, Division of Tax & Accounting Administration, PO Box 643700, Cincinnati, OH 45264-3700

**NON-PAYMENT OR ZERO BALANCE DUE TO:** City of Dayton, Division of Tax & Accounting Administration, PO Box 7999, Akron, OH 44306-0999

**REFUND REQUEST TO:** City of Dayton, Division of Tax & Accounting Administration, PO Box 7999, Akron, OH 44306-0999

Completed tax returns will be accepted through the Fax as an original document. All necessary information and attachments must be included. Income tax preparation service will be provided only to those households earning \$35,000 or less. In the event your check is returned unpaid for insufficient funds or uncollected funds, we may electronically debit your account for the principal amount of the check. A return check fee, currently \$25.00, as set forth by the Director of Finance, will be assessed.

**Online tax preparation tool:** <http://www.cityofdaytontax.com> Forms are available at [www.daytonohio.gov](http://www.daytonohio.gov)

Forms line 937-333-3501, Fax Number 937-333-4280, E-mail for forms: [taxforms@daytonohio.gov](mailto:taxforms@daytonohio.gov)

Forms Available: Office Hours: Monday through Friday 8:00 AM to 5:00 PM City Hall, First Floor Lobby, 101 W Third St. Dayton, Oh 45402